**Name Reservation for Insurance Companies**

(Please note: this form is not for Insurance Agencies)

(PLEASE TYPE OR PRINT)

|  |  |
| --- | --- |
| Date: | |
| Reservation expires one year from date of issue indicated below.  *NOTICE: We will* not *notify you of the reservation expiration. It is your responsibility to renew the name reservation.* | |
| Fee: $25.00 made payable to: Treasurer, State of Maine | |
| Company reserving name: |  |
| Company address: |  |
| Contact person: |  |
| Telephone number: |  |
| E-mail address: |  |
| Requested name to be reserved: |  |
| NAIC # (of company name is being reserved for): |  |
| GROUP # and NAME (new name will be part of) |  |
| Reason for name reservation:  (please check one) | Name change  UCAA Expansion Application  Reservation Renewal  Other: |

Return form to Lauri Cooper, with the $25 fee, at the postal address above.

For ~ overnight delivery or physical delivery service only ~ send to:

76 Northern Ave., Gardiner, ME 04345

If you have any questions, please contact Lauri Cooper at (207) 624-8464 or laurelyn.s.cooper@maine.gov.